Fill in	this infor	mation to identify your case:						irected	in this form and	in Form
Debto	or 1	Andrzej Swider			12	22A-1St	rbb:			
Debto (Spous	or 2 e, if filing)	Agata Swider				□ 1. T	here is no pres	umptio	n of abuse	
United States Bankruptcy Court for the: Northern District of Illinois						á		nade ur	nder <i>Chapter 7</i>	mption of abuse Means Test
Case (if know	number vn)		□ 3. The Means Test does not a qualified military service bu					ot apply now be		
							eck if this is a			17
Offi	cial F	orm 122A - 1				_ 0	00K II 11 II 0 IO 0		naoa ming	
		7 Statement of Your Cu	rrer	nt Moi	nthly Inc	com	е			12/1
attach case n qualify Part	a separate umber (if l ring militar	and accurate as possible. If two married people esheet to this form. Include the line number to known). If you believe that you are exempted from y service, complete and file Statement of Exempleulate Your Current Monthly Income four marital and filing status? Check one of	which tom a pr	the addition resumption	nal information of abuse becar	applies. use you	On the top of a do not have pring	ny addit narily c	tional pages, writ onsumer debts o	te your name and or because of
		arried. Fill out Column A, lines 2-11.	,							
	■ Marrie	ed and your spouse is filing with you. Fill o	ut both	h Columns	A and B. lines	s 2-11.				
		ed and your spouse is NOT filing with you								
		ng in the same household and are not leg		-	_	olumns	A and B. lines	2-11.		
	☐ Livi per	ng separately or are legally separated. Fill halty of perjury that you and your spouse are ag apart for reasons that do not include evad	out Co	olumn A, li separated	nes 2-11; do n d under nonba	ot fill ou nkruptc	it Column B. By y law that appli	checkies or th		
101 the	1(10A). For 6 months,	erage monthly income that you received from all example, if you are filing on September 15, the 6-radd the income for all 6 months and divide the total the same rental property, put the income from that	nonth p	eriod would Fill in the re	l be March 1 thro sult. Do not inclu	ough Aug ide any i	ust 31. If the amount m	ount of y ore than	our monthly incon once. For examp	ne varied during ble, if both
						Column A Debtor 1		Column B Debtor 2 or non-filing spouse		
	Your gross wages, salary, tips, bonuses, overtime, and commissions (before payroll deductions).					\$	3,530.00	\$	2,552.00	
	Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in.					\$	0.00	\$	0.00	
1 :	of you or from an u and room	nts from any source which are regularly p your dependents, including child suppor nmarried partner, members of your househol mates. Include regular contributions from a s to not include payments you listed on line 3.	t. Inclu d, you	ide regulai r depende	contributions nts, parents,	\$	0.00	\$	0.00	
1		ne from operating a business, profession	, or fai	rm						
					otor 1					
	Gross rec	eipts (before all deductions)	\$	0.00						
(Ordinary a	and necessary operating expenses	-\$	0.00			0.00	_	0.00	
i		nly income from a business, profession, or fa	rm \$	0.00	Copy here ->	> \$	0.00	\$	0.00	
6.	Net incor	ne from rental and other real property			tor 1					
	_		c	0.00	otor 1					
		eipts (before all deductions)	\$ -\$	0.00						
	Ordinary a	and necessary operating expenses	-\$	0.00						

Official Form 122A-1

0.00 Copy here -> \$

\$

0.00

0.00

\$

\$

0.00

0.00

7. Interest, dividends, and royalties

Net monthly income from rental or other real property

Case 18-17469 Doc 2 Filed 06/20/18 Entered 06/20/18 08:25:46 Desc Main Document Page 2 of 2

Debtor 1 **Agata Swider** Debtor 2 Case number (if known) Column A Column B Debtor 1 Debtor 2 or non-filing spouse 8. Unemployment compensation 0.00 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you For your spouse Pension or retirement income. Do not include any amount received that was a 0.00 0.00 benefit under the Social Security Act. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below. 0.00 0.00 0.00 0.00 Total amounts from separate pages, if any. 0.00 0.00 \$ 11. Calculate your total current monthly income. Add lines 2 through 10 for 3,530.00 2,552.00 6,082.00 each column. Then add the total for Column A to the total for Column B. Total current monthly Part 2: **Determine Whether the Means Test Applies to You** 12. Calculate your current monthly income for the year. Follow these steps: 12a. Copy your total current monthly income from line 11 Copy line 11 here=> 6,082.00 Multiply by 12 (the number of months in a year) x 12 72,984.00 12b. The result is your annual income for this part of the form 12h. 13. Calculate the median family income that applies to you. Follow these steps: Fill in the state in which you live. Fill in the number of people in your household. Fill in the median family income for your state and size of household. 68,687.00 13. To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 14. How do the lines compare? Line 12b is less than or equal to line 13. On the top of page 1, check box 1, There is no presumption of abuse. Line 12b is more than line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Form 122A-2. 14b. Go to Part 3 and fill out Form 122A-2. Part 3: Sian Below By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct. X /s/ Andrzej Swider X /s/ Agata Swider Agata Swider Andrzei Swider Signature of Debtor 1 Signature of Debtor 2 Date June 20, 2018 Date June 20, 2018 MM / DD / YYYY MM / DD / YYYY If you checked line 14a, do NOT fill out or file Form 122A-2. If you checked line 14b, fill out Form 122A-2 and file it with this form.

Andrzej Swider